PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/697262

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			15					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			FE minus 20=		. 0			X\$ 9=	; :	OR	X\$18=	
				nus 3 =	D			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT						U'		+135=		OR	+270=	270
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL		OR	TOTAL	980
CLAIMS AS AMENDED - PAF (Column 1) (Column 1)						(Column 3)		SMALL	NTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CL AIM	=	┨╏	X40=		OR	X80=	
	THOTTHEOL	NIT TO THE TAIL	OETH CE DET	ENDEN	I OLAM		ן נ	+135=		OR	+270=	
							1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	The Department of the Control of the	(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT TEL		•	ADDIT. I EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST 1BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	• •	=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF M	Minus	***	T CL AIM	=		X40=		OR	X80=	
<u> </u>	THISTTREE	-	OLIN EL DE	LNDLIA	OLAIM	<u> </u>	ا	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)		ADDII: 1 EE •		•	ADDIT: I EE	
AMENDMENT C	·	CLAIMS REMAINING AFTER AMENDMENT	·	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	∐ [X\$ 9=		OR	X\$18=	
	Independent	NTATION OF M	Minus	***	T CL AUA	=	┧ ┞	X40=		OR	X80=	
	FINOI PHESE	MIATION OF M	OLITPLE DEF	- EINDEN	CLAIM		┙╽	+135=		OR	+270=	
•	If the entry in colu	mn 1 is less than t	he entry in colu	mn 2, writ	e "0" in co	lumn 3.	[TOTAL		OΒ	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												